

Return To: City of Concord  
 Code Administration  
 Health Services  
 37 Green St  
 Concord, NH 03301



Permit #: \_\_\_\_\_  
 Check #: \_\_\_\_\_  
**Fee \$1000.00**  
 Make checks payable to  
**CITY OF CONCORD**

## Pawnbrokers, Second Hand Dealers, Cash for Gold Temporary License Application

Applicant Information			
Company Name: _____	Phone: _____		
Company Address: _____			
<i>Street Address</i>	<i>Unit #</i>		
<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
Owner Name: _____			
Owner Email: _____	Phone: _____		
Company Phone: _____			
Manager Name: _____	Phone: _____		
Email: _____			

Operation Information				
Address _____				
<i>If Different From Above</i>	<i>Street Address</i>	<i>Unit #</i>	<i>City/State</i>	<i>ZIP Code</i>
Dates of Operation From: _____ To: _____				
Hours of Operation From: _____ To: _____				
State License #: _____			Expires: _____	

Additional Information	
Original Criminal Record Attached	YES <input type="checkbox"/> NO <input type="checkbox"/>
Cash for Coins/Jewelry	YES <input type="checkbox"/> NO <input type="checkbox"/>
Cash for Gold	YES <input type="checkbox"/> NO <input type="checkbox"/>
Pawnbroker	YES <input type="checkbox"/> NO <input type="checkbox"/>
Secondhand Dealer	YES <input type="checkbox"/> NO <input type="checkbox"/>

Licensee must adhere to all Local, State, and Federal Regulations and conditions set forth by other agencies for operation regarding Pawnbrokers, Pawnshops, Second Hand Dealers and Cash for Gold.

**License Expires one (1) year from date of issue**

and may be revoked for just case RSA 398:3 or 398:14, City of Concord Ordinance Chapter 15 Article 15-2-6.

Disclaimer and Signature	
Applicant's Signature: _____	Date: _____
Police Department: _____	Date: _____
Health & Licensing Officer: _____	Date: _____